

**STATEMENT OF UNDERSTANDING  
MONTGOMERY GI BILL - SELECTED RESERVE**

I, \_\_\_\_\_ certify that:  
(PRINT NAME: LAST, FIRST, MI, AND SSN)

1. Initial one:

- a. \_\_\_\_\_ I am an enlisted member. I understand that I am obligating myself to 6 years of Selected Reserve Service from my date of enlistment, reenlistment, or extension indicated below. I must also meet the training requirements for the program in which I enlisted. Basic eligibility begins for RK, RP, and RY upon completion of Initial Active Duty for Training (IADT). For all others (including RX) follow the guidance in paragraph 2 below.
- b. \_\_\_\_\_ I am an officer. I understand that I am obligating myself to serve for 6 years in the Selected Reserve from the date indicated below. This obligation is in addition to any other period of obligated Selected Reserve service. I must also meet the training requirements.

2. Initial each of the following statements:

- a. \_\_\_\_\_ I have enough obligated service remaining on my enlistment contract for the 6 year Selected Reserve service requirement.
- b. \_\_\_\_\_ I understand this service obligation satisfies an eligibility requirement for the Montgomery GI Bill (Selected Reserve) Educational Assistance Program (10 U. S. C. 16132 (a)(1)).
- c. \_\_\_\_\_ I understand that this 6 year Selected Reserve obligation satisfies only one of the eligibility requirements and that I must complete all of the eligibility requirements before I am entitled to benefits.
- d. \_\_\_\_\_ I understand that if I do not participate satisfactorily in the Selected Reserve, for any part of this obligation, my eligibility will be terminated. I will then be subject to penalty recoupment.

3. My Selected Reserve obligation for the MGIB begins on \_\_\_\_\_ and will be completed on \_\_\_\_\_.

\_\_\_\_\_  
Signature of Member

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature and Title of Witnessing Official

\_\_\_\_\_  
Date

Original: SERVICING PERSRU  
Copy: CGPC-adm-3  
MEMBER  
UNIT PDR